

## Texas Reclassification Tree

Inmate No. 19-2565  
 Name: Quintero, Maria

**Are Classification review Circumstances Aggravating? or Mitigating?**

(circle) Current Classification

|         |
|---------|
| Maximum |
| 1       |
| 2       |
| 3       |
| 4       |
| 5       |
| 6       |
| 7       |
| Minimum |

(circle) Reclassification

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| 1 |
| 2 |
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| 7 |
| 8 |
| 9 |

(circle) Current Classification

|         |
|---------|
| Maximum |
| 1       |
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| 3       |
| 4       |
| 5       |
| 6       |
| 7       |
| Minimum |

**High Risk Flags**

- ☐ Assaultive
- ☐ Escape
- ☐ Suicidal
- ☐ Mental
- ☐ Gang Member
- ☐ Other \_\_\_\_\_

**Special Condition Flags**

- ☐ Protective Custody
- ☐ Medical
- ☐ Juvenile
- ☐ Handicap/Disabled
- ☐ Body Fluid Watch
- ☐ Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Comments: moved to separation 13 improve jail climate. Per Lt. Bivarides.

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 9/9/20

Review Officer: S/D Drough 0440 Next Review Date: \_\_\_\_\_

☒ No Change in Current Classification (check)

SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 6/7/73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

[Signature] 7/9/20

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:



**Texas Reclassification Tree**

Name: Quintanilla, Mario

Are Classification review Circumstances  
Aggravating? or Mitigating?

| (circle)<br>Current<br>Classification |   | (circle)<br>Reclassification | (circle)<br>Current<br>Classification |  | (circle)<br>Reclassification |
|---------------------------------------|---|------------------------------|---------------------------------------|--|------------------------------|
| 1                                     |   | 1                            | 1                                     | Marked Improvement in Compliance, Positive Attitude Change | 1                            |
| 2                                     | Serious Assault/Escape Behavior Problem, or                             | 2                            | 2                                     | Marked Improvement in Compliance, Positive Attitude Change | 2                            |
| 3                                     | Less Serious Behavior Problem   | 3                            | 3                                     | No Behavior Problem  | 3                            |
| 4                                     | Serious Assault/Escape Behavior Problem, or                             | 4                            | 4                                     | No Behavior Problem  | 4                            |
| 5                                     | Less Serious Behavior Problem   | 5                            | 5                                     | No Behavior Problem  | 5                            |
| 6                                     | Serious Assault/Escape Behavior Problem, or                             | 6                            | 6                                     | No Behavior Problem  | 6                            |
| 7                                     | Less Serious Behavior Problem   | 7                            | 7                                     | No Behavior Problem  | 7                            |
| 8                                     | Serious Behavior Problem  | 8                            | 8                                     | No Behavior Problem  | 8                            |
| 9                                     | Less Serious Behavior Problem (non-assault/escape), hold/detainer added | 9                            | 9                                     | No Behavior Problem  | 9                            |

**High Risk Flags**  
 Assaultive  
 Escape  
 Suicidal  
 Mental  
 Gang Member  
 Other \_\_\_\_\_

**Special Condition Flags**  
 Protective Custody  
 Medical  
 Juvenile  
 Handicap/Disabled  
 Body Fluid Watch  
 Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Comments:

Classified to Day 4 cell.  
On Account to needing space  
for inmate's Roomer status

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 7/1/2020

Review Officer: API Ceballos Next Review Date: 1/5/21

☒ No Change in Current Classification (check)

SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 6/7/1973

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

Ra #0555

7/1/2020

@1954

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

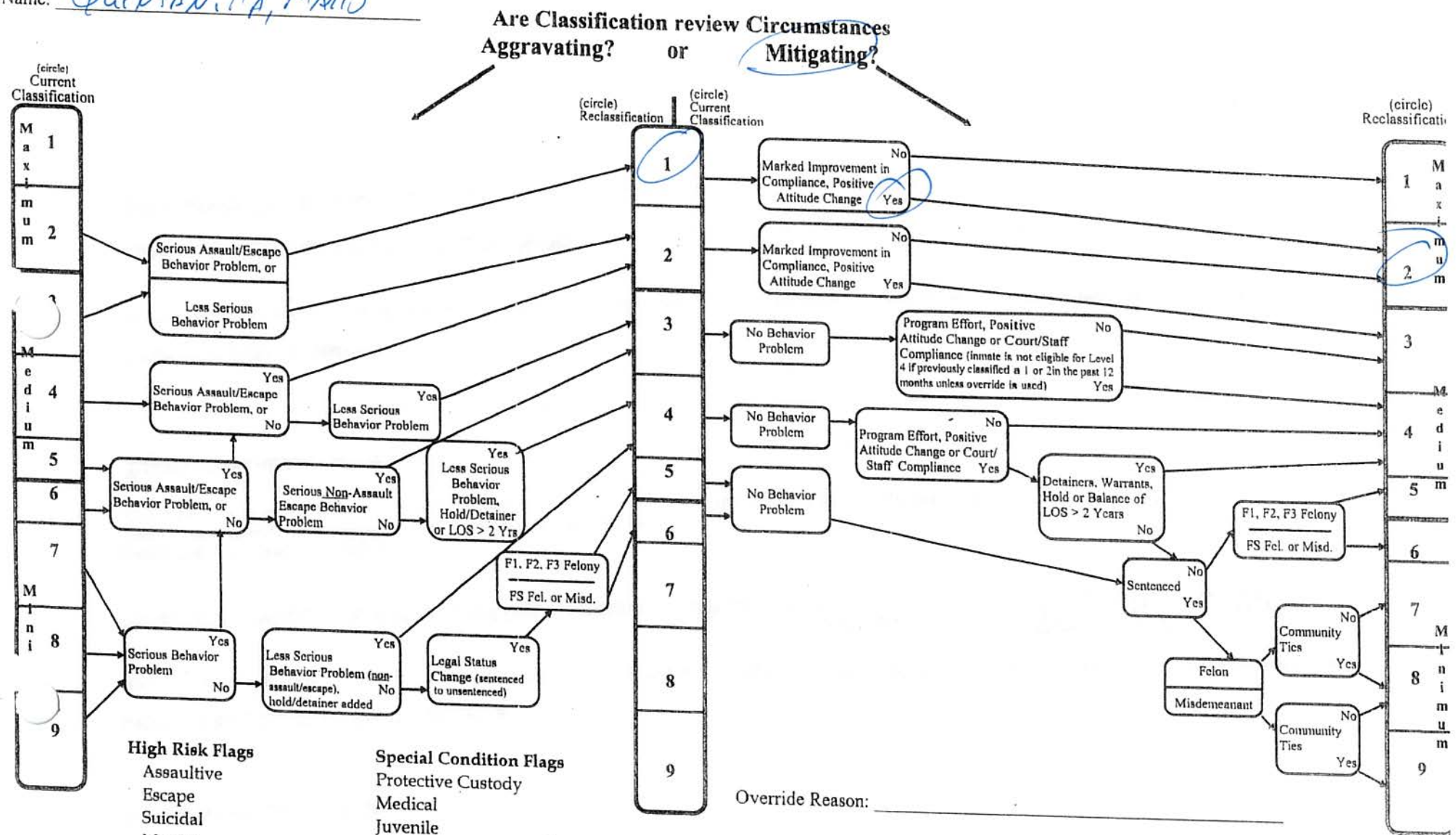
Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:



Name: Quintanilla, Mario

Texas Reclassification Tree



Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: \_\_\_\_\_

Review Officer: \_\_\_\_\_ Next Review Date: \_\_\_\_\_

\_\_\_\_ No Change in Current Classification (check)

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quetzal, MarioInmate ID: 192565D.O.B: 6/7/23Circle Whether Override Of Security Designation Was Recommended:

YES

NOWritten Explanation of Override:Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:[Signature] Sep 59 6/17/2020Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:



Name: Quintanilla, Mario

**Are Classification review Circumstances**  
**Aggravating? or Mitigating?**

(circle) Current Classification

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(circle) Reclassification

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(circle) Current Classification

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| 3 |
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| 5 |
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(circle) Reclassification

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**High Risk Flags**

- Assaultive
- Escape
- Suicidal
- Mental
- Gang Member
- Other \_\_\_\_\_

**Special Condition Flags**

- Protective Custody
- Medical
- Juvenile
- Handicap/Disabled
- Body Fluid Watch
- Other \_\_\_\_\_

Comments: Reclassified to P4 D cell needed for other 1m medical. Remains DLE.

SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 06/07/73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

R Castillo D4 D 4/11/20 DLK

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:



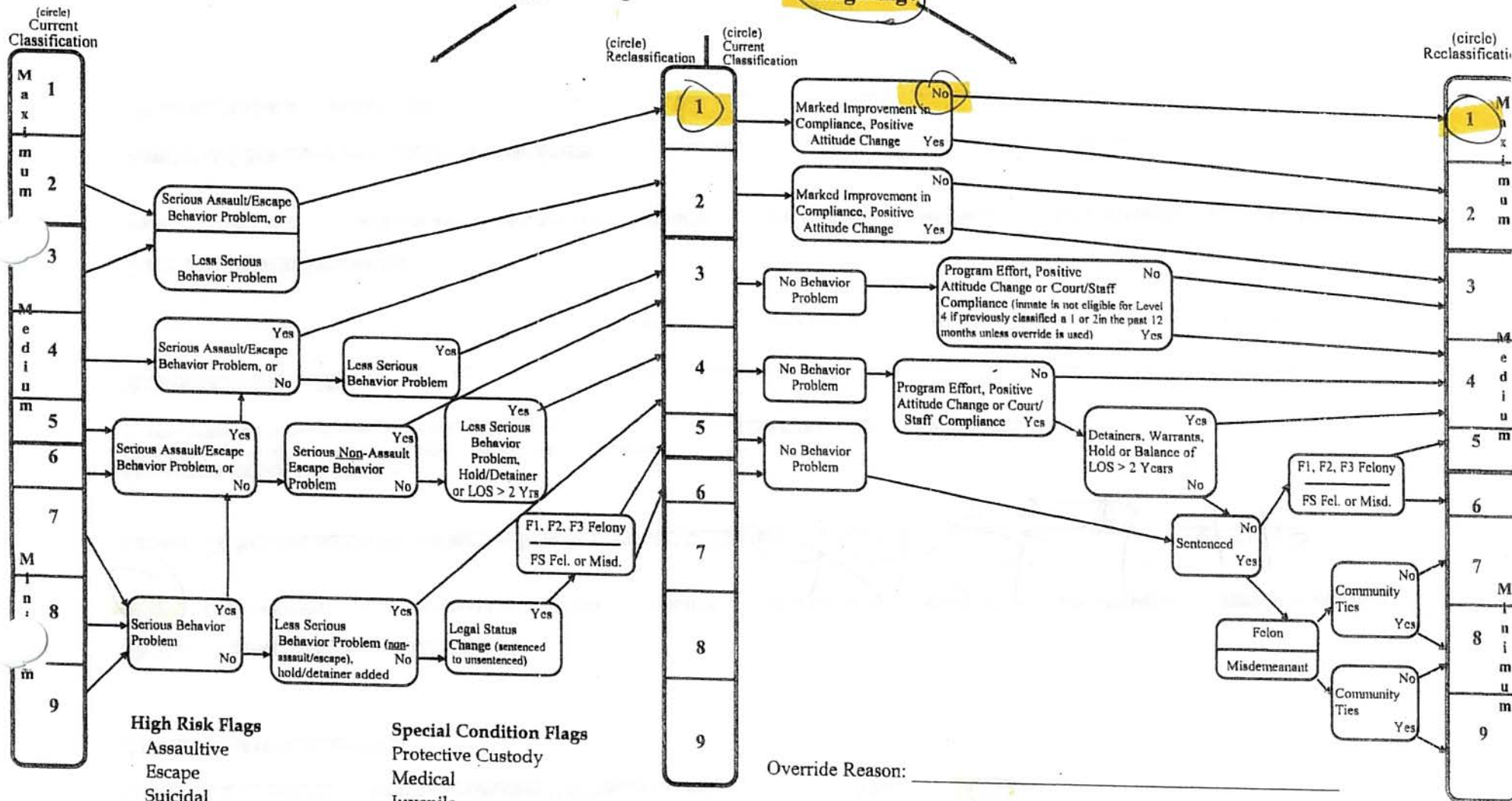
Inmate No. 19-2565

# Texas Reclassification Tree

Name: Quintanilla, Mario

5  
#

Are Classification review Circumstances  
Aggravating? or Mitigating?



## High Risk Flags

Assaultive  
Escape  
Suicidal  
Mental  
Gang Member  
Other \_\_\_\_\_

## Special Condition Flags

Protective Custody  
Medical  
Juvenile  
Handicap/Disabled  
Body Fluid Watch  
Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 5/31/20 @ 2245 hrs.

Review Officer: K. Krauskopf Next Review Date: \_\_\_\_\_

☒ No Change in Current Classification (check)

Comments: 30 day review. No change in status. Currently DLK Day 4 for fighting

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 19-2565D.O.B: 06/07/73Circle Whether Override Of Security Designation Was Recommended:

YES

**NO**Written Explanation of Override:Circle The Recommended Security Designation:**HIGH**

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:[Signature] 5/31/20  
R. SuleSupervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

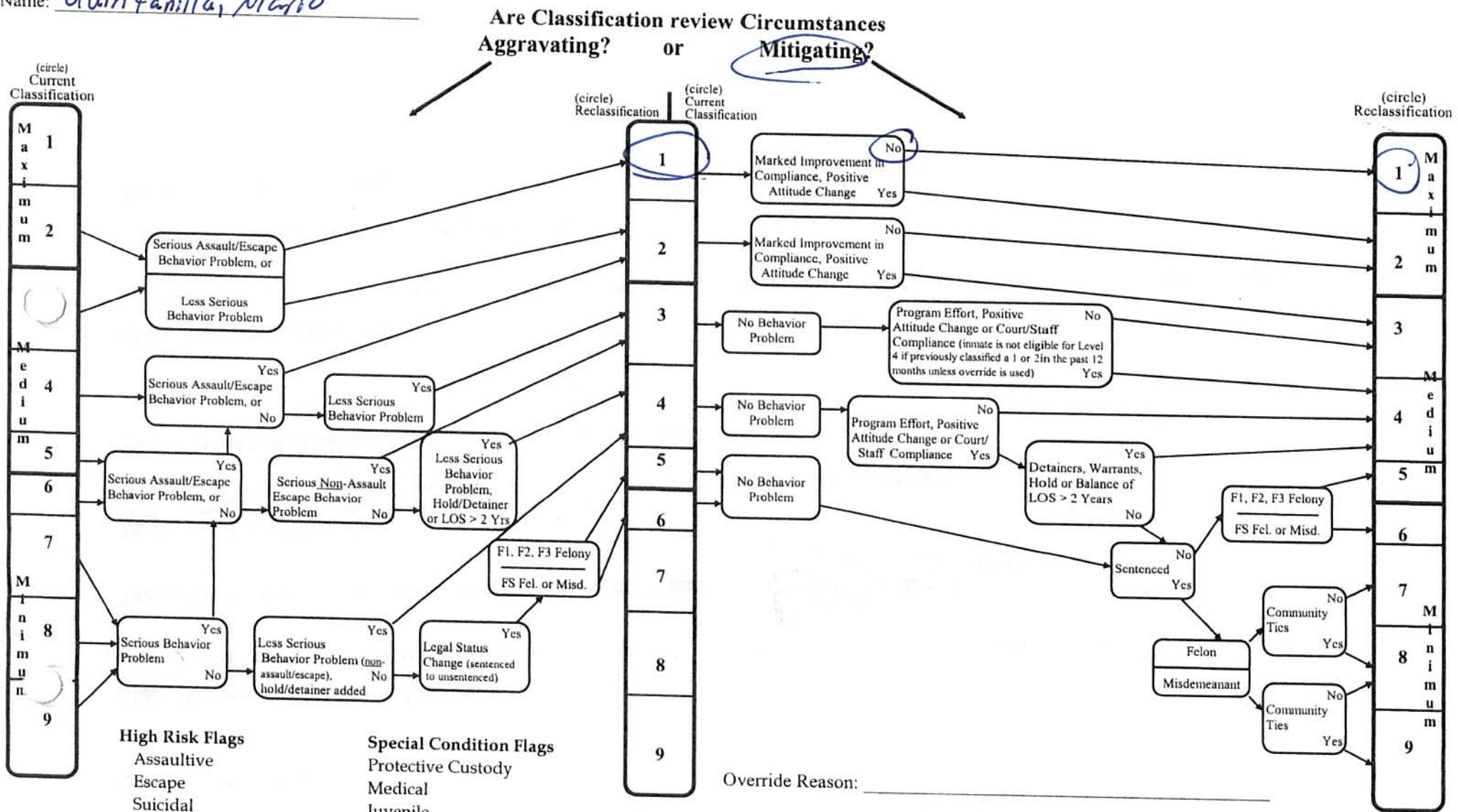
LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:



Name: Quintanilla, Mario



Comments: Reclassified to Disciplinary lock down  
For fighting with SGT. Martinez

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 5/18/20

Review Officer: N. Pathendari Next Review Date: \_\_\_\_\_

☒ No Change in Current Classification (check)



## SECURITY LEVEL REASSESSMENT

Inmate Name: ~~192505~~ Quintanilla, MarioInmate ID: 192505D.O.B: 6/17/73Circle Whether Override Of Security Designation Was Recommended:

YES

NOWritten Explanation of Override:Circle The Recommended Security Designation:HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:D. Rotherbaum  
CPL J. MartinezSupervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

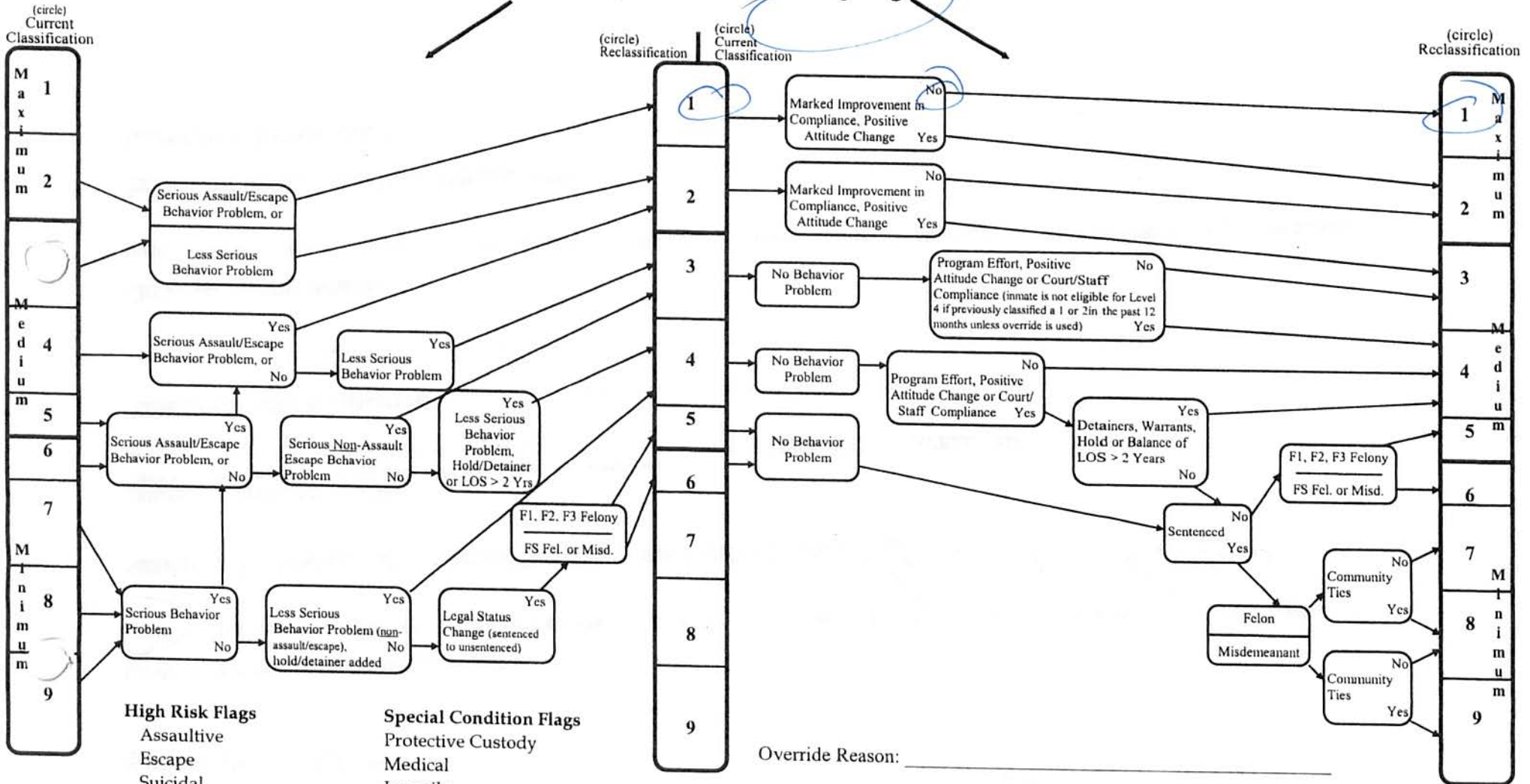
VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:

Texas Reclassification Tree

Name: Quintanilla Mario

Are Classification review Circumstances  
Aggravating? or Mitigating?



High Risk Flags

- Assaultive
- Escape
- Suicidal
- Mental
- Gang Member
- Other \_\_\_\_\_

Special Condition Flags

- Protective Custody
- Medical
- Juvenile
- Handicap/Disabled
- Body Fluid Watch
- Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: \_\_\_\_\_

Review Officer: \_\_\_\_\_ Next Review Date: \_\_\_\_\_

No Change in Current Classification (check)

Comments: Administrative lockdown pending disciplinary action for fighting w/ Inmate Gabriel Hilburn

SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla Mario

Inmate ID: 192585

D.O.B: 6/7/73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

[Signature] 24 F 5/14/2020

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

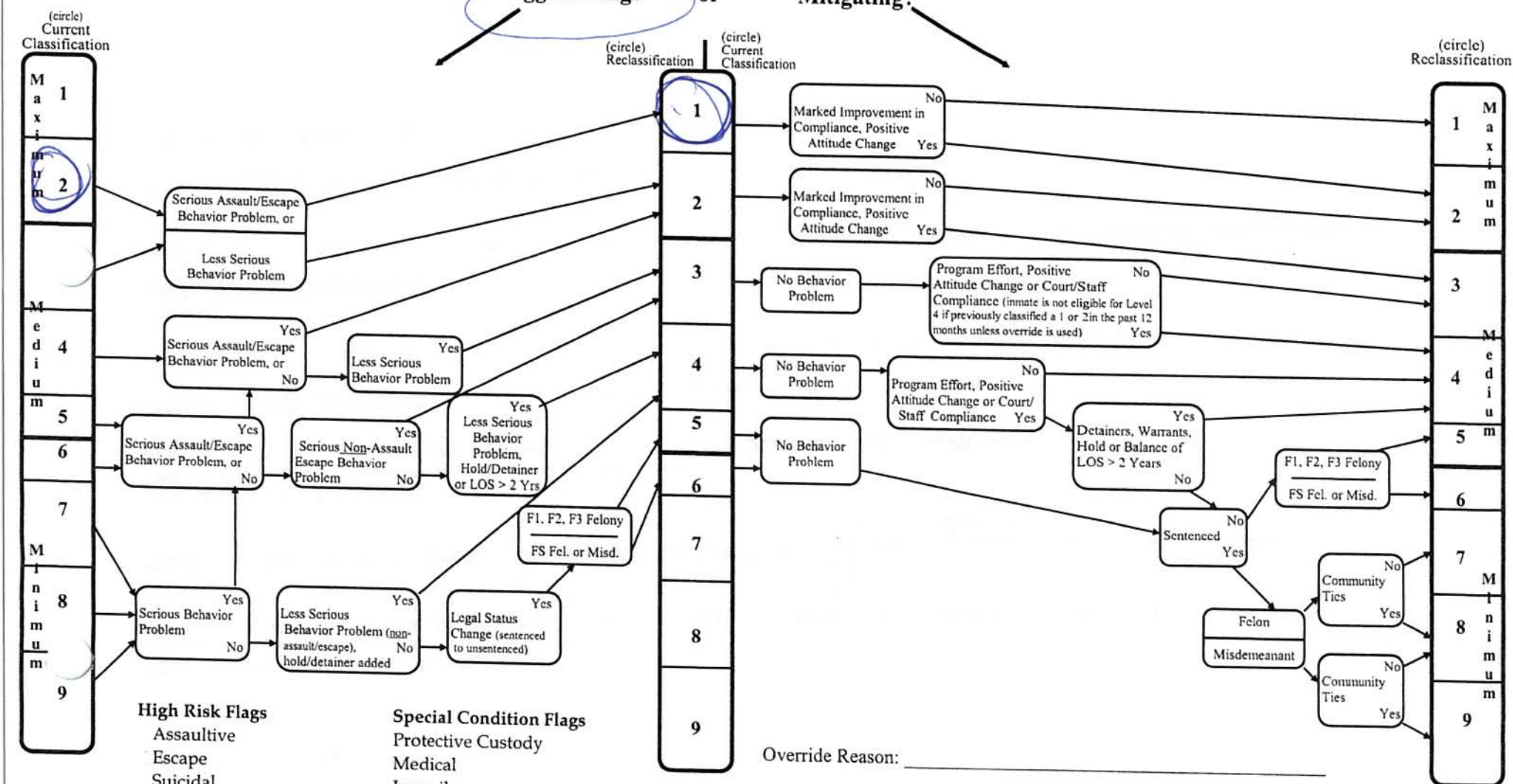
VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:



Name: Quintanilla, Mario



SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 6/7/73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

Calli Carter 5/14/20  
C. Prater

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:

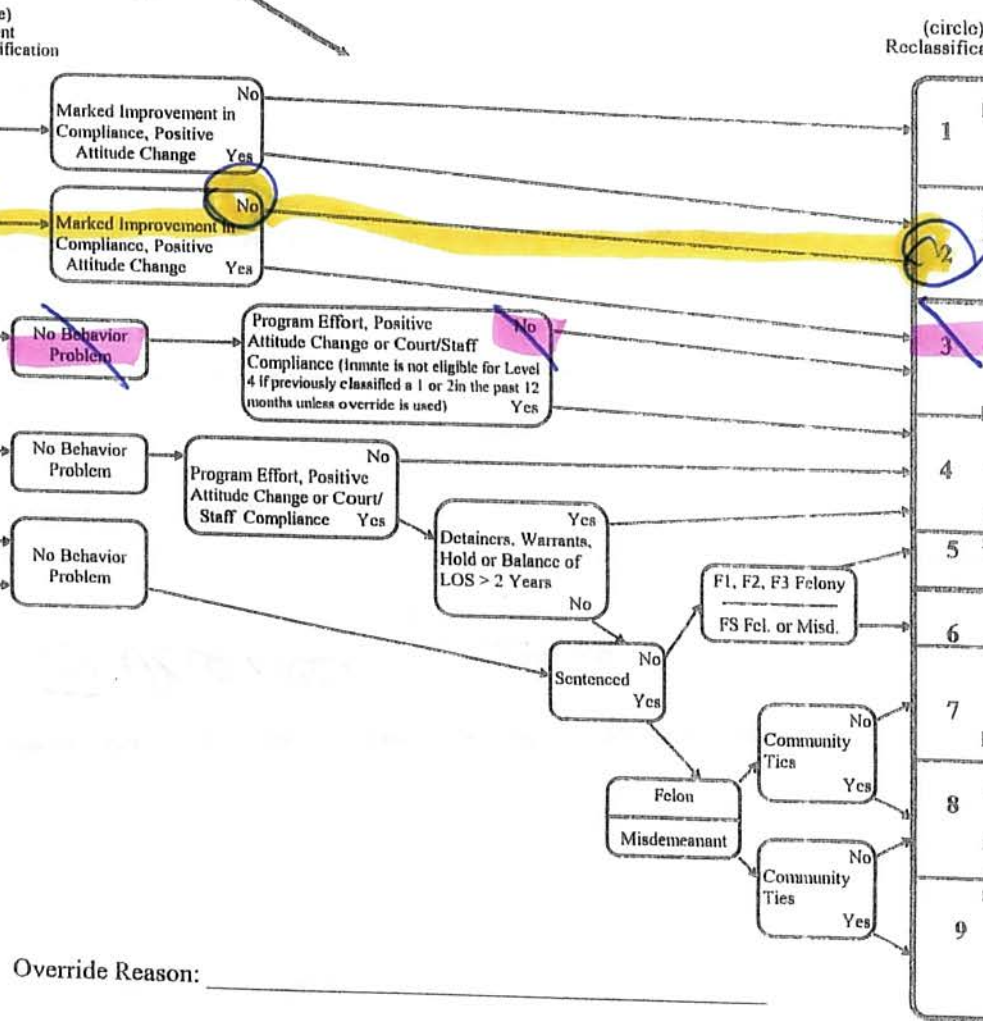
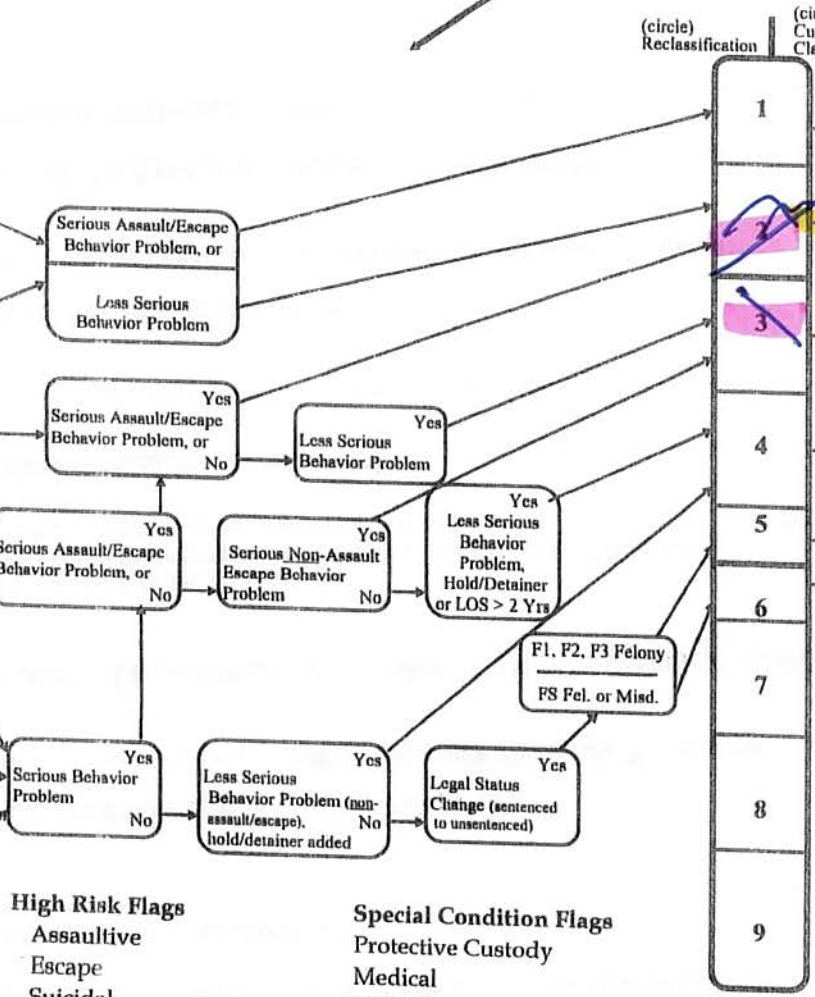


Name: Quintanilla, Mario

Are Classification review Circumstances  
 Aggravating? or Mitigating?

(circle) Current Classification

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|---|---|
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**High Risk Flags**  
 Assaultive  
 Escape  
 Suicidal  
 Mental  
 Gang Member  
 Other \_\_\_\_\_

**Special Condition Flags**  
 Protective Custody  
 Medical  
 Juvenile  
 Handicap/Disabled  
 Body Fluid Watch  
 Other \_\_\_\_\_

Comments: 90 day review. No change in status.

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 4.30.20

Review Officer: Nancers Next Review Date: e 0430hrs

☒ No Change in Current Classification (check)



SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 06-07-73

Circle Whether Override Of Security Designation Was Recommended:

YES

☒ NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY

**MEDIUM ASSAULTIVE-ESCAPE**

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

F. Mance

4.30.20

R. J. - 90

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:

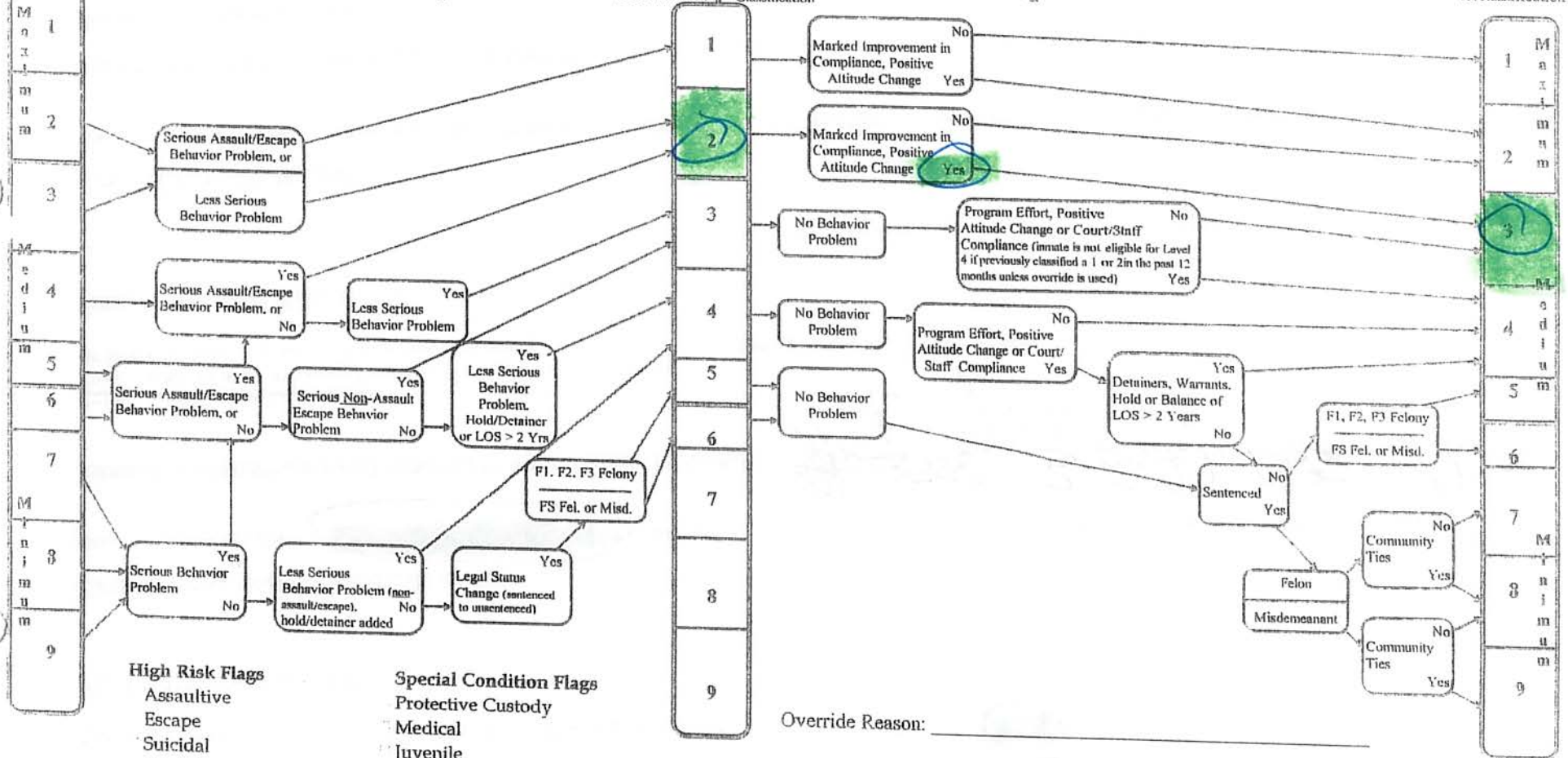
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(circle)  
Current  
Classification

| (circle)<br>Reclassification | (circle)<br>Current<br>Classification |
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| 100                          | 100                                   |

(circle)  
Current  
Classification

(circle)  
Reclassification



Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 3-2-2020 1300hr

Review Officer: D. Higginsbotham 558 Next Review Date: \_\_\_\_\_

Comments: Re classifying to Day 3 per SGT Martinez Review Officer: D. Higgins  
Due to unable to be mixed with Inmate parent, Carlos  
Northpointe, Inc. Thru No Change in Curr

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## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla MarioInmate ID: 19-2565D.O.B: 06/07/1973Circle Whether Override Of Security Designation Was Recommended:

YES

NO ☒Written Explanation of Override:Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE ☒

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:558 3-2-22 13<sup>th</sup> Day 3  
CP [Signature]Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED ☒Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:



Are Classification review Circumstances  
Aggravating? or Mitigating?

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## SECURITY LEVEL REASSESSMENT

Inmate Name:

Puintanilla, Mario

Inmate ID:

9406

D.O.B:

06-07-73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

Calli Cantu  
Cpraska

2/28/20

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

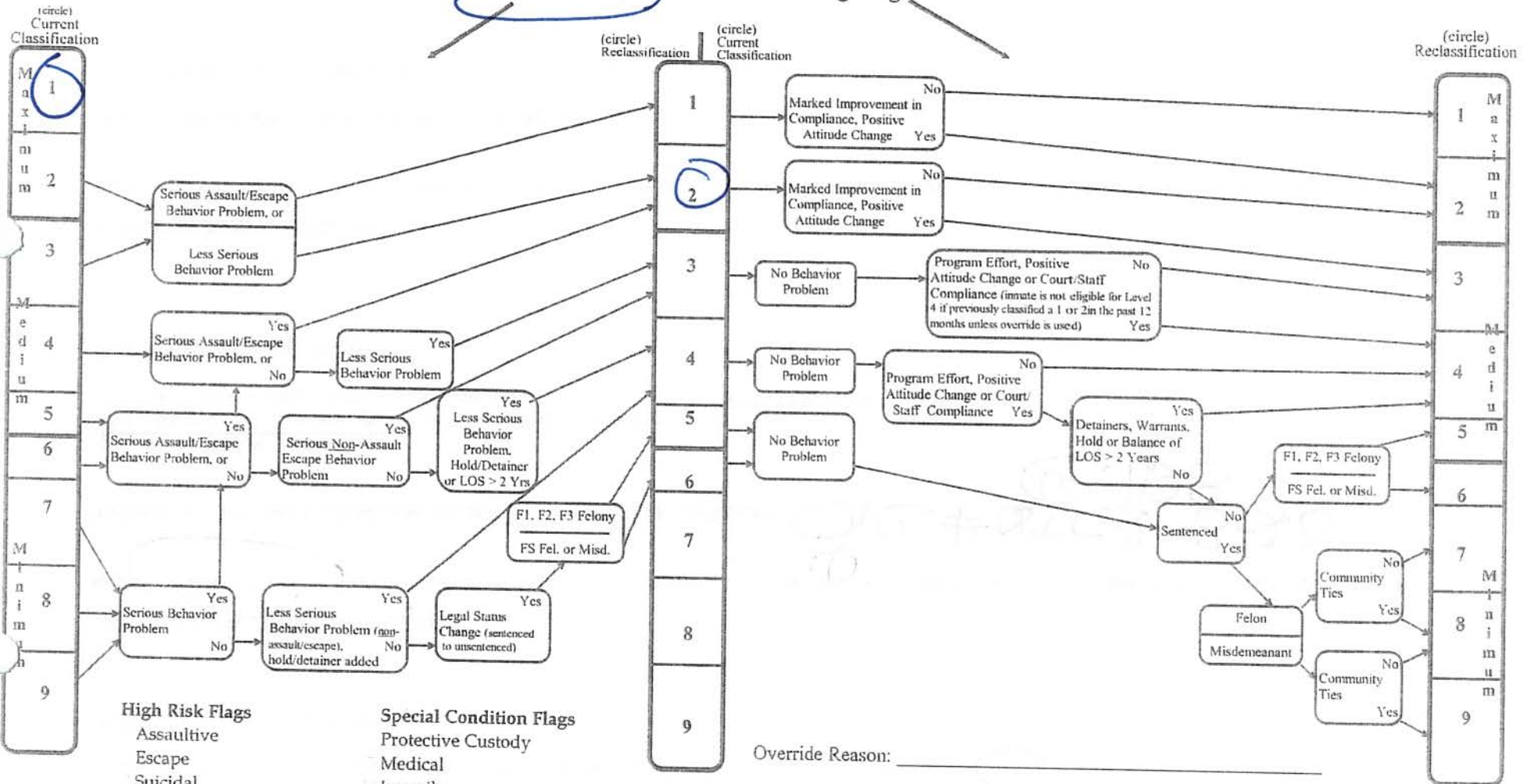
VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:

Inmate No. 19-2565

## Texas Reclassification Tree

Name: Quintanilla, MarioAre Classification review Circumstances  
Aggravating? or Mitigating?

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date 2-3-20Review Officer: CPL. Caballero Next Review Date: \_\_\_\_\_

\_\_\_\_ No Change in Current Classification (check)

Comments:

Classified to Day 4(L) Due to threatening Inmate

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Rhoades, Jemy in Day 2



## SECURITY LEVEL REASSESSMENT

Inmate Name:

Quintanilla, Mario

Inmate ID:

19-2565

D.O.B:

6.7.73

Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:Circle The Recommended Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:Sc #0552-3-20  
@ 1128Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:

Inmate No. 19-2565

## Texas Reclassification Tree

Name: Quintanilla, MarioAre Classification review Circumstances  
Aggravating? or Mitigating?

| (circle)<br>Current<br>Classification | (circle)<br>Reclassification | (circle)<br>Current<br>Classification | (circle)<br>Reclassification |
|---------------------------------------|------------------------------|---------------------------------------|------------------------------|
| 1                                     | 1                            | 1                                     | 1                            |
| 2                                     | 2                            | 2                                     | 2                            |
| 3                                     | 3                            | 3                                     | 3                            |
| 4                                     | 4                            | 4                                     | 4                            |
| 5                                     | 5                            | 5                                     | 5                            |
| 6                                     | 6                            | 6                                     | 6                            |
| 7                                     | 7                            | 7                                     | 7                            |
| 8                                     | 8                            | 8                                     | 8                            |
| 9                                     | 9                            | 9                                     | 9                            |

**High Risk Flags**  
 Assaultive  
 Escape  
 Suicidal  
 Mental  
 Gang Member  
 Other \_\_\_\_\_

**Special Condition Flags**  
 Protective Custody  
 Medical  
 Juvenile  
 Handicap/Disabled  
 Body Fluid Watch  
 Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Comments: 90 day Review. No change in Status.Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 2-1-20 2258Review Officer: Cpl. Mancera #555 Next Review Date: \_\_\_\_\_

✓ No Change in Current Classification (check)

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 19-2565D.O.B: 6-7-1973Circle Whether Override Of Security Designation Was Recommended:

YES

☒ NOWritten Explanation of Override:Circle The Recommended Security Designation:HIGH **CLOSE CUSTODY** MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUMSignature Of Reassessment Staff Member and Date Reassessment Completed: F. Mancera 2-1-20  
2259Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:  
\_\_\_\_\_  
\_\_\_\_\_Circle Final Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review: \_\_\_\_\_Recommended Housing Assignment: \_\_\_\_\_



Inmate No. 9406  
 Name: Quintanilla Mano

## Texas Reclassification Tree

Are Classification review Circumstances  
 Aggravating? or Mitigating?

(circle) Current Classification

(circle) Reclassification

(circle) Current Classification

(circle) Reclassification

1

2

3

4

5

6

7

8

9

High Risk Flags

Assaultive

Escape

Suicidal

Mental

Gang Member

Other

Special Condition Flags

Protective Custody

Medical

Juvenile

Handicap/Disabled

Body Fluid Watch

Other

Override Reason:

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 1-29-20

Review Officer: [Signature] Next Review Date: 1-29-20

No Change in Current Classification (check)

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 9406D.O.B: 6-7-73Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:[Signature] 1-29-20  
0900Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE MEDIUM LOW MEDIUM MINIMUM LOW MINIMUM VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:

Inmate No. 19-2565Name: Quintanilla, Mario

## Texas Reclassification Tree

Are Classification review Circumstances  
Aggravating? or Mitigating?

(circle) Current Classification

(circle) Reclassification

(circle) Current Classification

(circle) Reclassification

High Risk Flags  
Assaultive  
Escape  
Suicidal  
Mental  
Gang Member  
Other \_\_\_\_\_

Special Condition Flags  
Protective Custody  
Medical  
Juvenile  
Handicap/Disabled  
Body Fluid Watch  
Other \_\_\_\_\_

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 1/29/20

Review Officer: Carter Next Review Date: 2/28/20

☒ No Change in Current Classification (check)

Comments: 30 Day review



## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 19-2565D.O.B: 6/7/73Circle Whether Override Of Security Designation Was Recommended:

YES

NOWritten Explanation of Override:Circle The Recommended Security Designation:HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:Calli Carter 11/29/20  
CPA/KASupervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

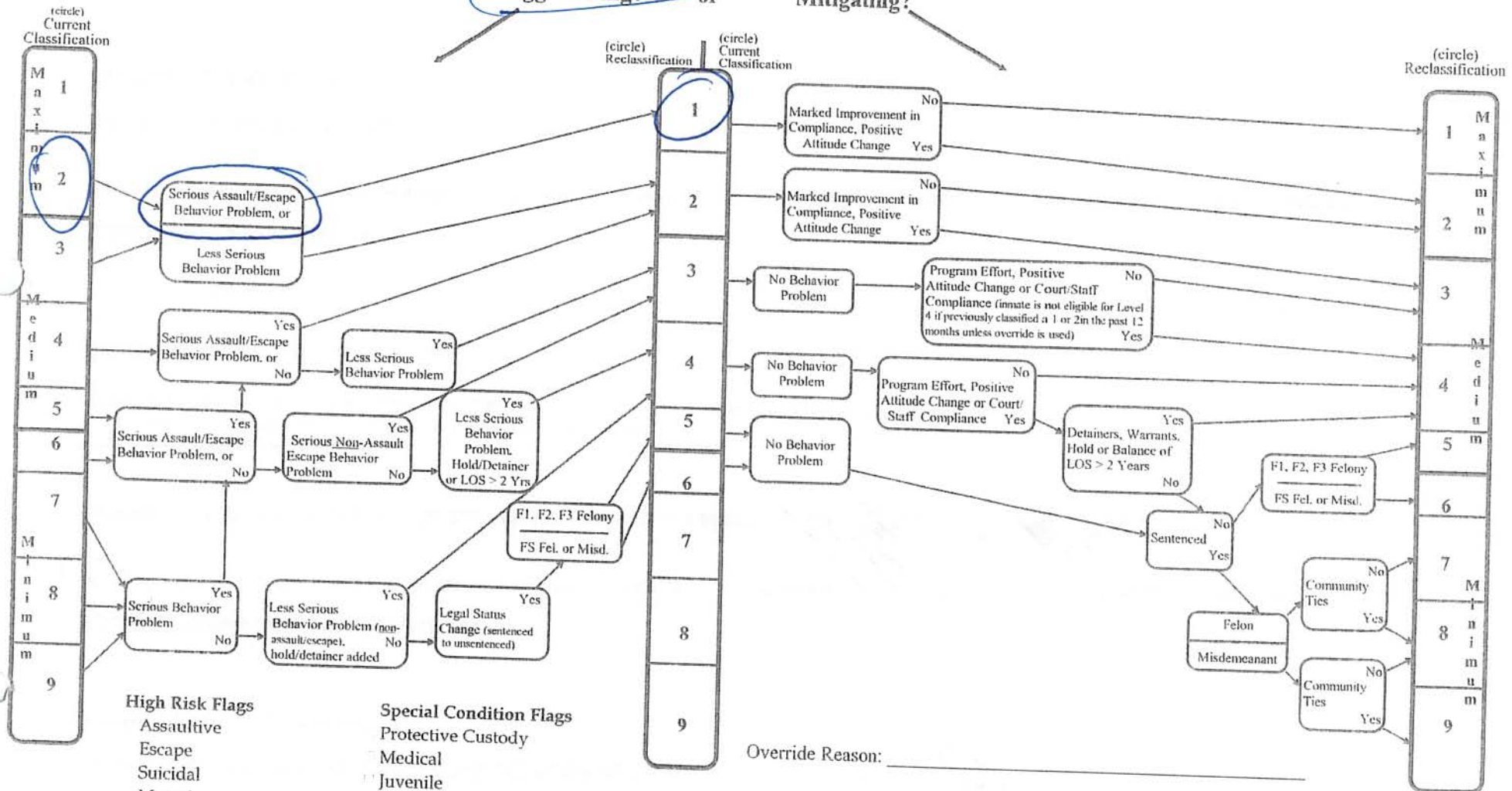
LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:

Inmate No. 192565Name: Quintanilla Mario

## Texas Reclassification Tree

Are Classification review Circumstances  
Aggravating? or Mitigating?

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 192565D.O.B: 6/7/73

Circle Whether Override Of Security Designation Was Recommended:

YES

NOWritten Explanation of Override:Circle The Recommended Security Designation:HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:[Signature] 01/09/2020Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVEDWritten Explanation of Disapproval:Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

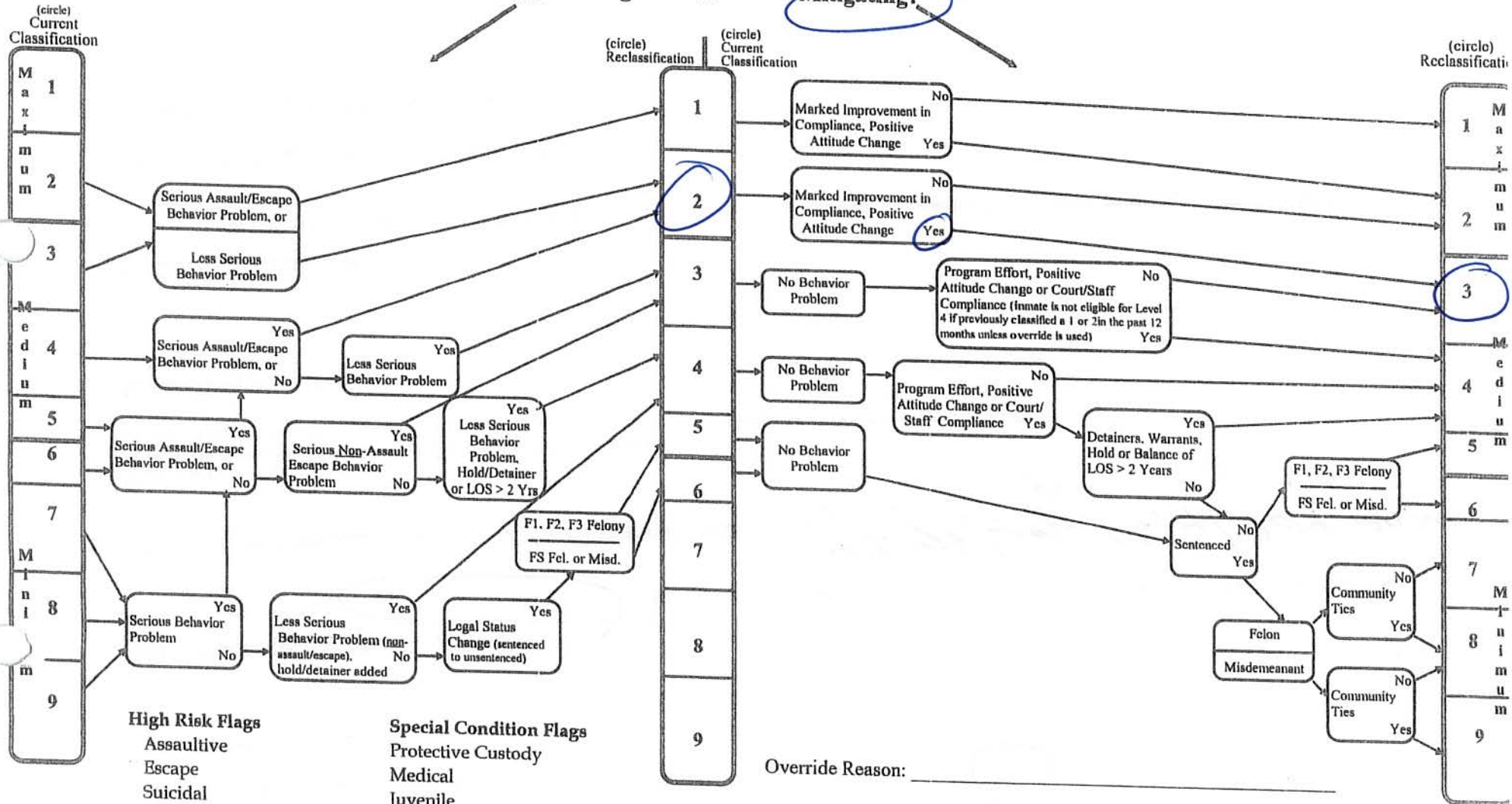
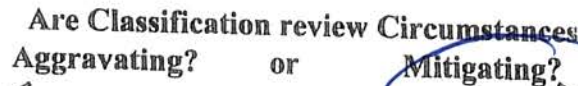
LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:



Name: Quintanilla, Mario



Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: 12/1/2019

Review Officer: Mendoza, Jose Next Review Date: \_\_\_\_\_

☐ No Change in Current Classification (check)

Comments: Reclassified TO population  
Released from lockdown Auth. Sgt. Martinez

## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 9406D.O.B: 11/06/19Circle Whether Override Of Security Designation Was Recommended:

YES

NO

Written Explanation of Override:Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:J. M. 12/4/2019 12:11pm  
K. to yg DAY 2Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment:

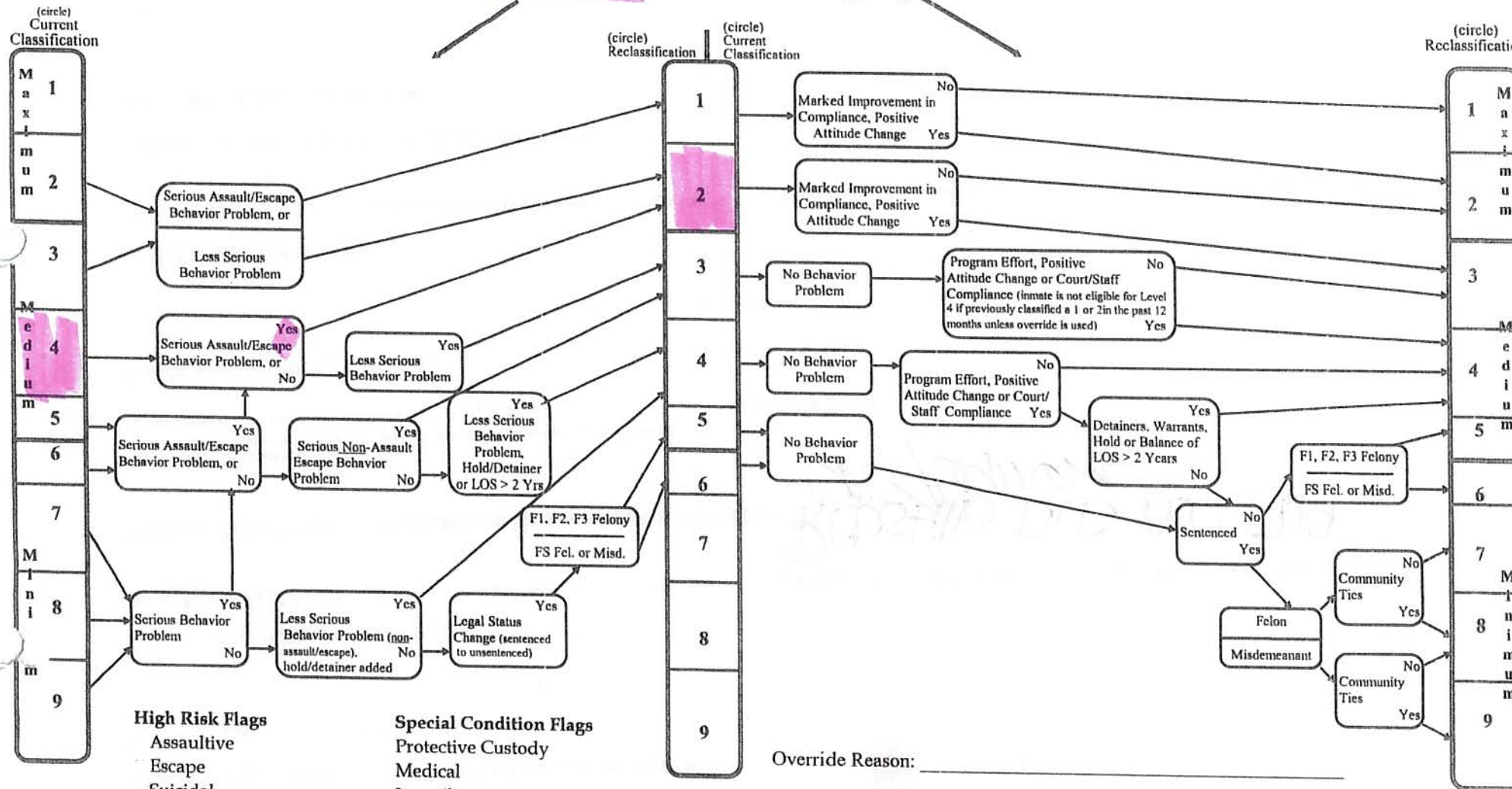


Inmate No. 44 19-2565

Name: Quintanilla, Mario

# Texas Reclassification Tree

Are Classification review Circumstances  
**Aggravating?** or **Mitigating?**



## High Risk Flags

Assaultive  
Escape  
Suicidal  
Mental  
Gang Member  
Other \_\_\_\_\_

## Special Condition Flags

Protective Custody  
Medical  
Juvenile  
Handicap/Disabled  
Body Fluid Watch  
Other \_\_\_\_\_

Comments: Reclassified to D1 D for fighting Donot mix w/ Solis, Roland.

Override Reason: \_\_\_\_\_

Override Assignment: (circle) 1 2 3 4 5 6 7 8 9 Date: NOV. 17, 19

Review Officer: R. Castillo Next Review Date: \_\_\_\_\_

\_\_\_\_ No Change in Current Classification (check)



SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, Mario

Inmate ID: 19-2565

D.O.B: 06/07/73

Circle Whether Override Of Security Designation Was Recommended:

**YES**

NO

Written Explanation of Override:

Circle The Recommended Security Designation:

HIGH

**CLOSE CUSTODY**

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:

R Castillo DID NOV. 17, 19  
CPL Calma

Supervisory Review Of Override:

Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:

Circle Final Security Designation:

HIGH

CLOSE CUSTODY

MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:

Recommended Housing Assignment:

## CLASSIFICATION NOTICE

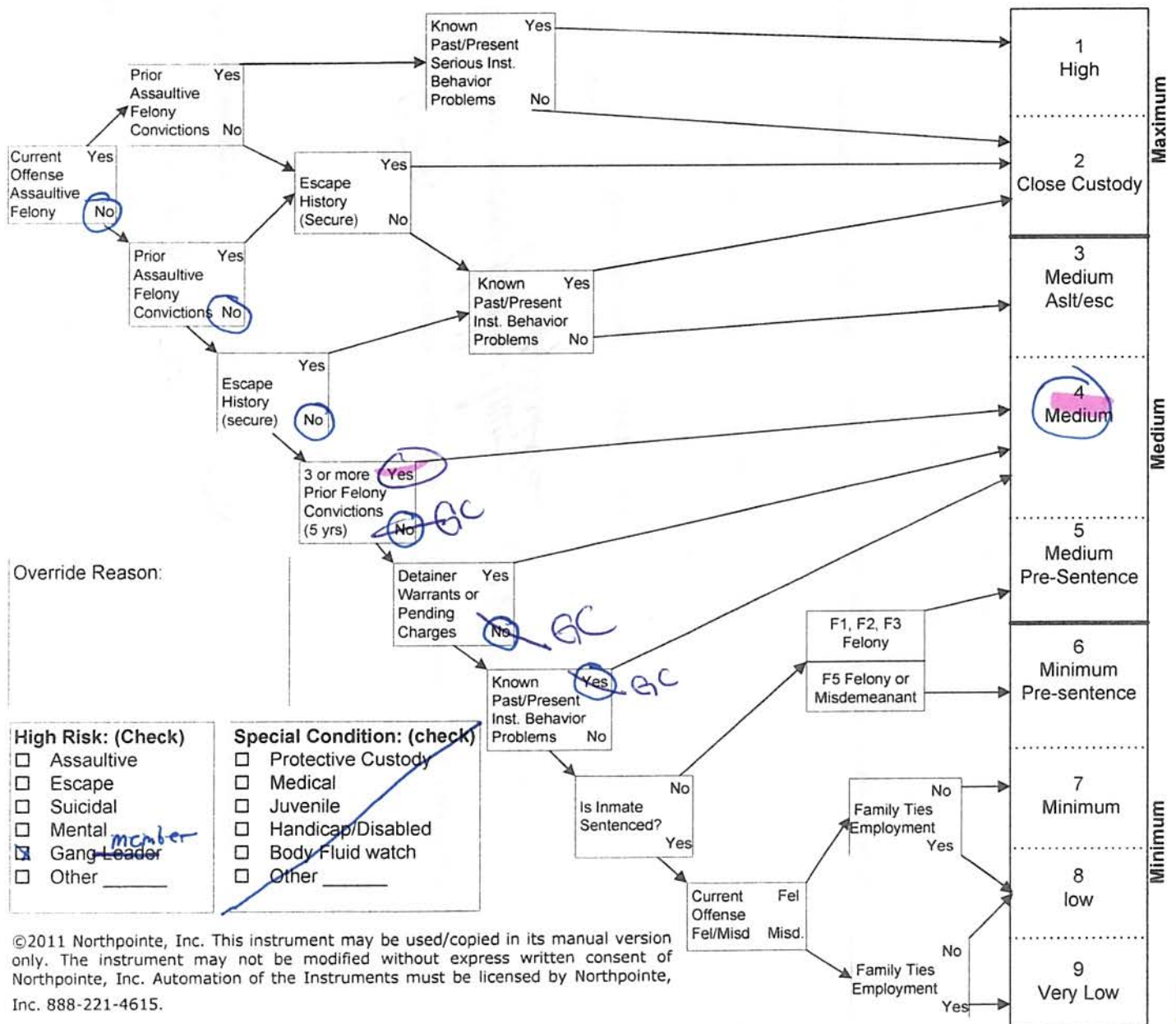
|   |                      |  |
|---|----------------------|--|
| NAME: (last) <u>Quintanilla</u>                                     | (first) <u>Mario</u> | (middle)   |
| JAIL NO: <u>9406</u>  | D.O.B. <u>6/7/73</u> | RACE: <u>W</u> SEX: <u>m</u> SSN: <u>461-25-7848</u> |
| Charge(s) 1) <u>Man/Del CS PS17=4008</u>                            | 2)                   | 3)   |
| You have been placed in the following classification: <u>medium</u> |                      |  |

This classification is determined by: current/past convictions; current/past institutional behavior; pending charges or holds in other jurisdictions (if any); sentenced or unsentenced; and/or any other information that may be deemed appropriate with regard to your personal security or the security of the facility. NOTE: Your classification can change when: charges are altered or reduced; you are sentenced; due to administrative hearings; due to regular periodic review; and / other reasons recommended by the jail staff.

Appeal Process: any inmate dissatisfied with his or her classification must appeal his / her classification, in writing, within ten (10) days of the primary classification or reclassification by addressing his/her appeal as APPEAL OF CLASSIFICATION and directing it to: the Sheriff or his designee.

|  |                       |
|--|-----------------------|
| Classified by: <u>J. Guerra</u>  | Date: <u>11/05/19</u> |
| Comments by staff: <u>Classified to Day 2 / Gave initial problems during intake &amp; Bookings</u> |                       |

Booking Date: 11/06/19



## SECURITY LEVEL REASSESSMENT

Inmate Name: Quintanilla, MarioInmate ID: 9406D.O.B: 6/7/73Circle Whether Override Of Security Designation Was Recommended:

YES

NOWritten Explanation of Override:Circle The Recommended Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Reassessment Staff Member and Date Reassessment Completed:Jonathan Lugo  
Cpralca11/8/19Supervisory Review Of Override:Circle Whether Override Of Security Designation Was Approved or Disapproved  
(If 'DISAPPROVED' is circled, provide a written explanation)

DISAPPROVED

APPROVED

Written Explanation of Disapproval:Circle Final Security Designation:

HIGH CLOSE CUSTODY MEDIUM ASSAULTIVE-ESCAPE

MEDIUM

LOW MEDIUM

MINIMUM

LOW MINIMUM

VERY LOW MINIMUM

Signature Of Supervisor and Date Of Override Review:Recommended Housing Assignment: